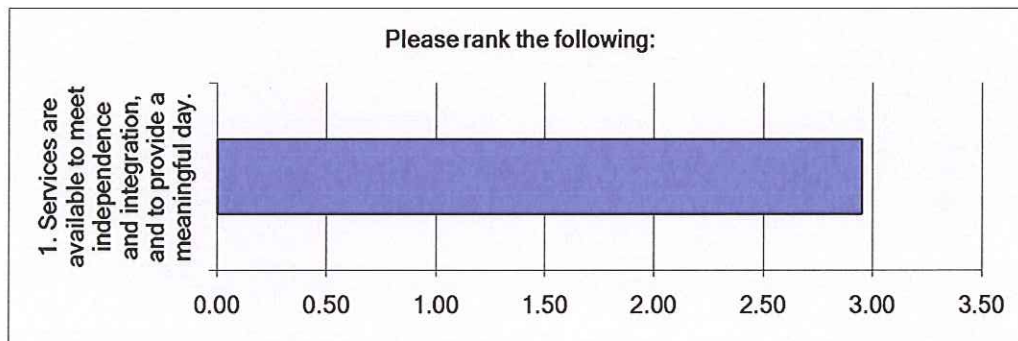


Provider Survey Responses **State Plan and Waiver Amendments** **March 2010**

Please rank the following:

Answer Options	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
1. Services are available to meet independence and integration, and to provide a meaningful day.	1	8	21	8	2.95	38
If not, what services should be developed?						14
<i>answered question</i>						38
<i>skipped question</i>						0



Responses:

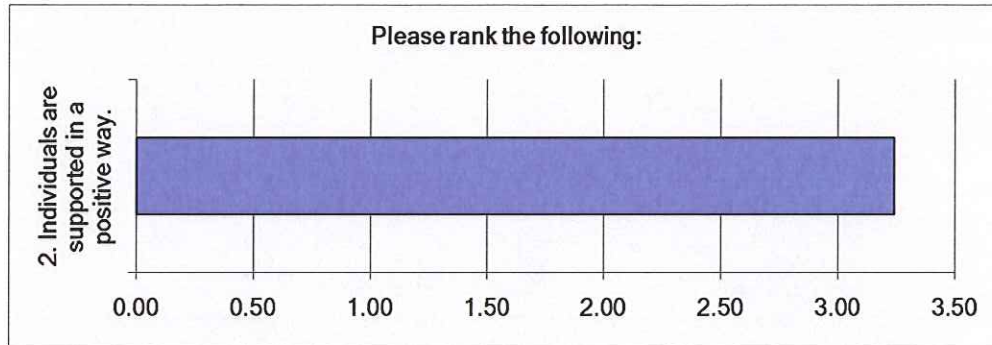
1. Can increase with mere community integration opportunities.
2. I wish there was better vocational services available in Lincoln for individuals. I love that supported residential is growing.
3. More proactive approach to be centered around person vs regs and licensure.
4. More supported job employment for our area. We have none.
5. Services to help develop leads for finding competitive employment opportunities within the community.
6. The new rule about not allowing Service Coordinators to transport individuals is a huge issue, IMHO. It appears that whoever decided to implement this policy is extremely NOT client centered. I would ask that this policy be reversed as soon as possible. The Omaha area Service Coordinators are among the best, and put their clients first in all areas. Their ability to relate to clients has been due to their ability to transport and meet clients for special events. I would like to know the reasoning behind this decision and who was responsible for it, so I can direct my opinions directly to this individual.
7. More flexible services. Intervention hours can be too restricting.
8. Some staff could use a little more training on what a meaningful day is. I think the social role valorization was very good.
9. Based on what is in the works for the next year, I believe the services will be in place to meet the needs of the population. I am a little confused as to where more traditional "supported day" services, i.e., helping people learn to access the community in which they live and developing friendships and social skills and money skills, etc. are going to be put if someone is not moving toward employment.
10. Need means of assessing what meaningful days is on an individual basis and then a method that allows for design and funding for such services.
11. The conflict arises when the activities are offered but declined by the consumer. This leaves staff with a gap of time to fill using their own creativity. I believe our staff is quite creative, but the consumers motivation to participate can be problematic with service delivery. We understand everyone in our services can choose their activities and sometimes they choose to not participate.

12. People must be allowed to use their home as a place to receive a portion of their Day Services. This is especially vital to people with Supported Services.

13. Fearful that with the non-specialized services, no training, working with a de-valued population will support people back into situations that sitting at home will constitute a meaningful day. If the team lacks a vision of inclusion the person supported will be taking a leap backwards.

Please rank the following:

Answer Options	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
2. Individuals are supported in a positive way.	0	2	25	11	3.24	38
Comments						7
<i>answered question</i>						38
<i>skipped question</i>						0

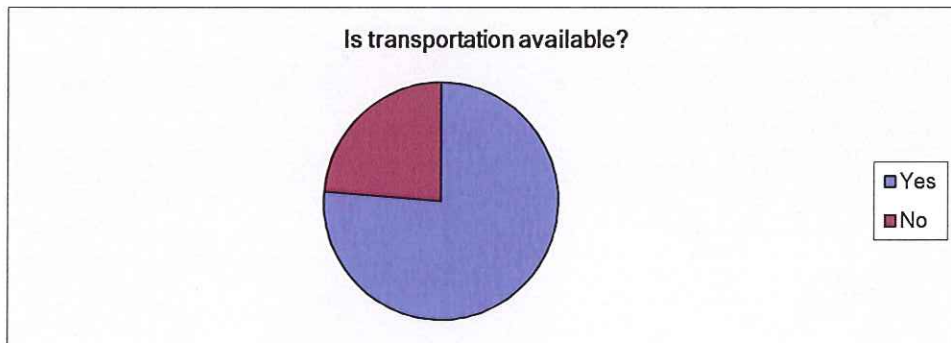


Responses:

1. Could be better, see above.
2. Please see comment from #1. For both this and the other, I would rank this area Strongly Agree, if it were talking only about residential/day providers, however due to the limited interaction that SC's are able to have with their individuals due to the no transportation issue, I have to mark this lower.
3. Changing medical needs is an on-going problem for some. The system is inflexible.
4. Most of the time. I think more consistency in age appropriate activities is needed.
5. If the system works the way it is supposed to, I believe people will be supported in a positive way. There are always going to be people that do not run the services the way they are intended.
6. New IPP format helps but still very difficult to adjust services/funding, but it is nearly based on changing needs.
7. They are more self directed than ever.

3. Is transportation available?

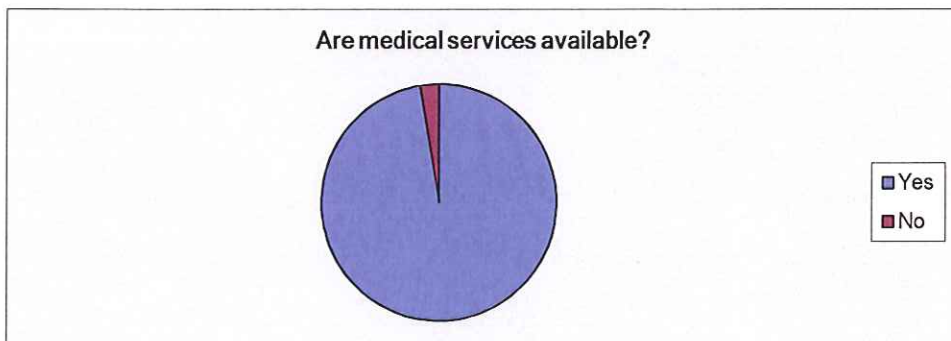
Answer Options	Response Percent	Response Count
Yes	76.3%	29
No	23.7%	9
<i>answered question</i>		38
<i>skipped question</i>		0



Responses: NONE

4. Are medical services available?

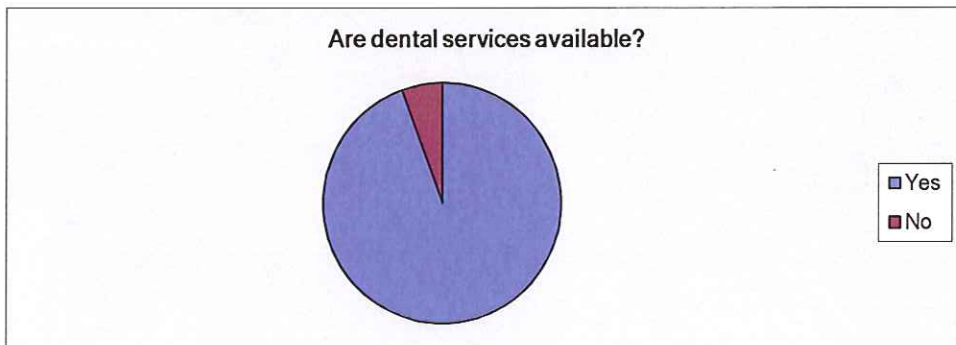
Answer Options	Response Percent	Response Count
Yes	97.4%	37
No	2.6%	1
<i>answered question</i>		38
<i>skipped question</i>		0



Responses: NONE

5. Are dental services available?

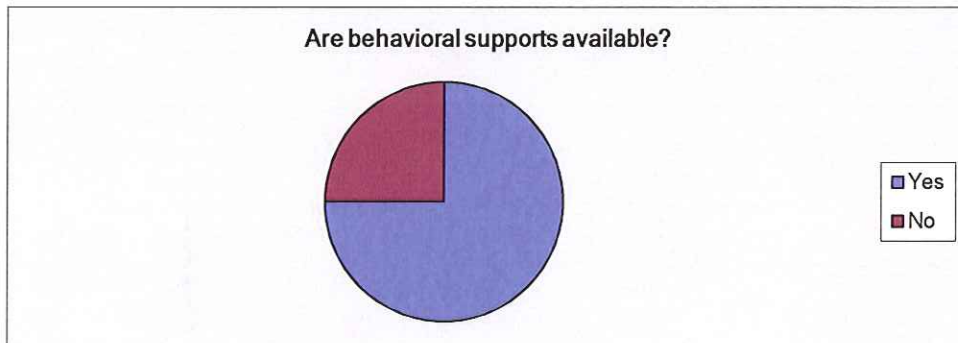
Answer Options	Response Percent	Response Count
Yes	94.4%	34
No	5.6%	2
<i>answered question</i>		36
<i>skipped question</i>		2



Responses: NONE

6. Are behavioral supports available?

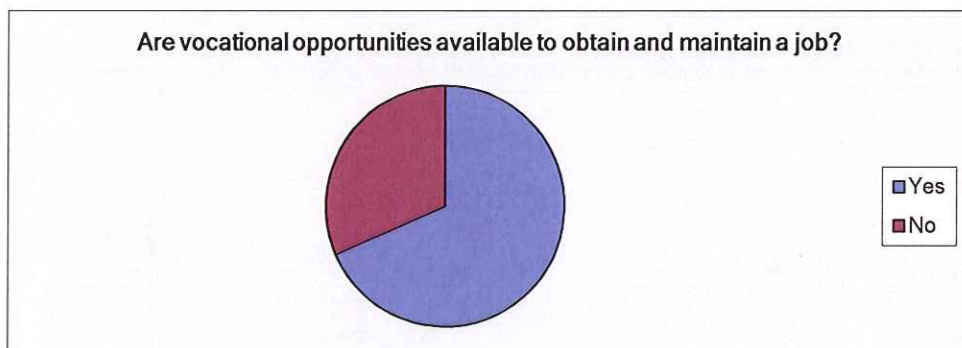
Answer Options	Response Percent	Response Count
Yes	75.0%	27
No	25.0%	9
<i>answered question</i>		36
<i>skipped question</i>		2



Responses: NONE

7. Are vocational opportunities available to obtain and maintain a job?

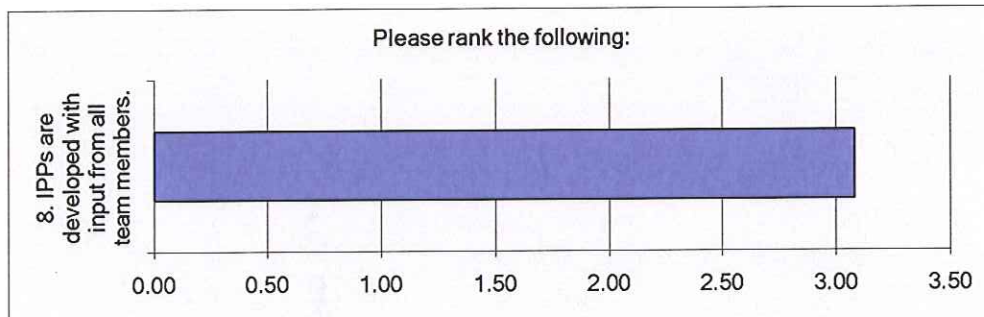
Answer Options	Response Percent	Response Count
Yes	68.4%	26
No	31.6%	12
<i>answered question</i>		38
<i>skipped question</i>		0



Responses: NONE

Please rank the following:

Answer Options	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
8. IPPs are developed with input from all team members.	1	3	25	8	3.08	37
Comments						14
<i>answered question</i>						37
<i>skipped question</i>						1

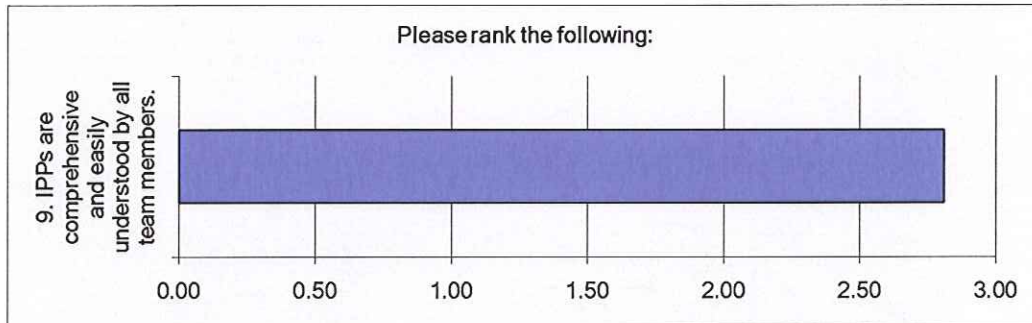


Responses:

1. I'm not convinced that we do a good enough job of really seeking the what is important to the person we are trying to serve.
2. I believe sometimes it can appear that Service Coordination has the final say or that they have more on an authority role with the team.
3. Need more input with guardians (make meetings when ALL team members can go).
4. Better now with new IPP.
5. Started transitioning, individuals input as well.
6. Most SCs come with forms already filled out for time because a lot of individuals can't handle more than an hour or
7. I think the new IPP format is easy to read and very client centered. I know some providers have issues with the wording or being asked to sign the IPP narratives, however I do not agree with their hesitation to do so. Since there is the disclaimer on the form, I'm not sure what their problem is. I personally review every IPP narrative and if there are problems or discrepancies, I have notified the SC and they have made the changes.
8. The individual maybe. The SC's are not trained well and then have way too much input...they often have never done the job.
9. Cannot comment as I do not attend these meetings.
10. We need to do a better job of listening to the individual in many cases. I like the idea of having some mediation training for SC's. I believe the new system of offering more choices could become more difficult if all team members are not in agreement.
11. IPPs sometimes seem to revolve more around the State's needs/regs then the person themselves and what they want.
12. Some are and some are not - some coordinators run the development of the plan and others work through the team process to really design services. New IPP format is much better than the old one and if followed properly and facilitated as intended, it is to be a team compilation.
13. Sometimes the person is too overlooked and not involved and engaged. Also, some team members tend to force their thoughts on what should happen.
14. Too often it is still the negative input that become the focus of the plan.

Please rank the following:

Answer Options	Strongly Disagree	Disagree	Agree	Strongly Agree	Rating Average	Response Count
9. IPPs are comprehensive and easily understood by all team members.	2	10	17	7	2.81	36
Comments						15
<i>answered question</i>						36
<i>skipped question</i>						2

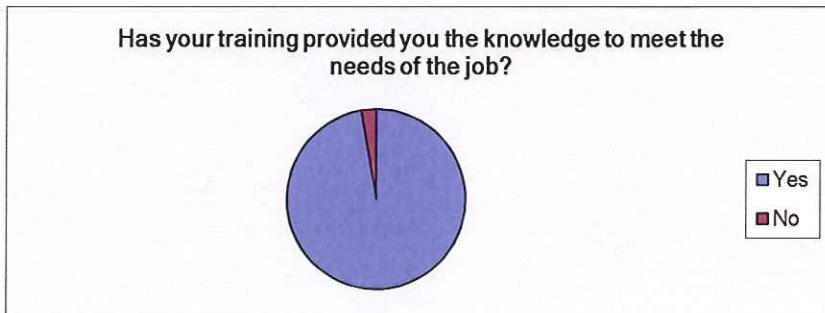


Responses:

1. I think the IPP is understandable, but I don't think it is comprehensive as it doesn't include prior history that relates to previous decisions that carry on to the present. In other words, "we now do this because of previous situations".
2. I am not sure that all family members understand the roles of the players or understand how the intervention hours work.
3. Any way to be more brief?
4. Not for guardians.
5. Needs to be more individual centered then what guardian wants.
6. The new "I" format works for some folks, but not others. Marked Disagree and Agree on the survey.
7. See above response from #8.
8. Too slow to get routed. The process is still inconsistent from SC to SC.
9. The new system for the IPP is good, but simply using I statements does not mean the person is getting what they want. I believe the new options that will be available and the individualized budgets will help solitify this concept. The new IPP is much easier to read and understand.
10. The format is confusing.
11. Printed documents are very hard to follow and find what is needed without being very familiar with where to look - just not a friendly layout.
12. It really depends on the Service Coordinators.
13. Almost no one understands them.
14. IPP's are poorly written, duplicates from the last meeting, changes don't get made/updated, really "good" progressive, move forward, planning and discussion rarely happen - they need to become a road map for the team/DSP to implement.

10. Has your training provided you the knowledge to meet the needs of the job?

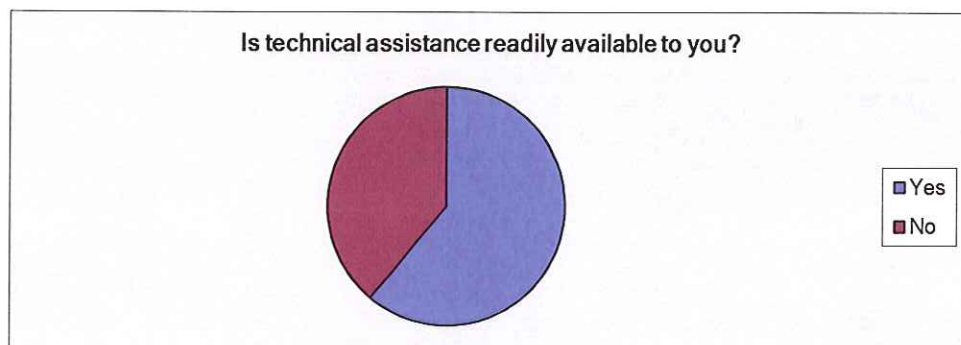
Answer Options	Response Percent	Response Count
Yes	97.2%	35
No	2.8%	1
If not, what would you suggest?		7
<i>answered question</i>		36
<i>skipped question</i>		2



Responses:

1. But for other staff, we need them to hit the ground running, so they don't always have all the knowledge they need before they start working with people.
2. Good information. Need more options in the state to use the ideas given.
3. Do not understand the question.
4. What training through....
5. Will need more specifics as the changes grow closer. More providers and front line managers will need to attend that training as they will be the ones attending the IPPs and implementing the changes and explaining them to staff, families and people we support.
6. But I think this job is so unique there is always additional education one could use.
7. Consistent application of regulations and Service Coordination.

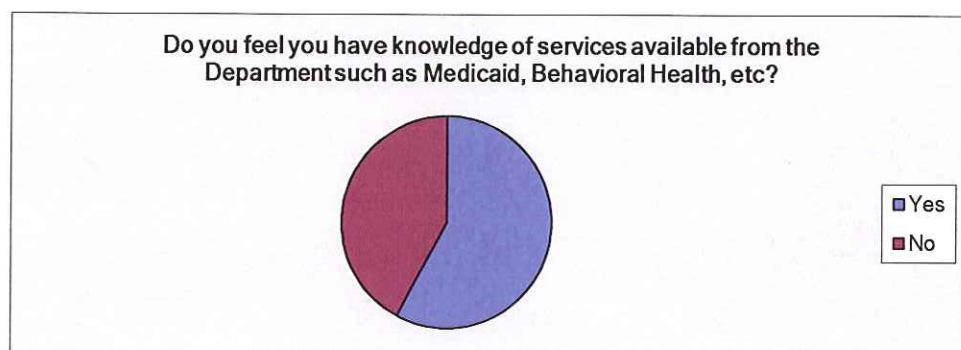
11. Is technical assistance readily available to you?		
Answer Options	Response Percent	Response Count
Yes	61.1%	22
No	38.9%	14
<i>answered question</i>		36
<i>skipped question</i>		2



Responses: NONE

12. Do you feel you have knowledge of services available from the Department such as Medicaid, Behavioral Health, etc?

Answer Options	Response Percent	Response Count
Yes	57.9%	22
No	42.1%	16
<i>answered question</i>		38
<i>skipped question</i>		0



Responses: NONE

13. Any additional comments:	
Answer Options	Response Count
	11
<i>answered question</i>	11
<i>skipped question</i>	27

Responses:

1. #3-Esp. "after hours", #4-Esp psych services out of West, #5-Unsure, #6-and State doesn't pay i.e. Medicaid or DD or Behavioral Health, #7-Not enough. Concern how taxpayers money is being spent. Appears adding high paying jobs (i.e., Deputy Administrators) and not filling front line staff (i.e., Service Coordinators, Staff Assistants, Program Specialists, etc.). Concern with BSDC not being certified and 100% funded with staff taxpayers moneyand the time frames to be re-certified. Concerned with lack of knowledge of developmental disabilities by top administrators.
2. #3-Lincoln bus system is not available during hours in the evening and weekends. #4-Have a difficult time finding a pediatrician who accepts Medicaid. #5-We have some wonderful dentists in Lincoln who are great with our individuals. #6-There needs to be more supports for individuals with major behaviors; all I know is OMNI and OTS. #7-Need to greatly improve in this area.
3. Need options to become more proactive with the supports that we provide, need to focus on the needs and wants of the individuals vs the regs & licensure. We want them to live a full, safe, happy life, need to be given the ability and freedom to think outside the box vs following every single note that is given without the worry of repercussions on ourselves and our agencies.
4. Need more of the details and responses to frequently asked questions. Will the number of staff hows provided, be monitored by service type or in total under the individualized budget method? (See slide 46).
5. #12- Most of the time. #7- Not in our area of ENCOR.
6. Need answers to to the list of Frequently Asked Questions.
7. #11-This varies depending on who you talk to at the Lincoln office. Some individuals are much more helpful in this area than others. #12- I would like to see more training for providers on Medicaid-what is and is not available to be covered, how soon items can be replaced, etc. A comprehensive list of this information would be useful. I am responding from both a provider AND guardian perspective so any correspondence you wish to share with me should be sent to (*email address removed*) . Thanks
8. Honestly, privatize this whole department and we might something done, but as long as government employees who have no accountability are in charge and working with it will always be inefficient mess. Let me say it again...there is no accountability if the State of Nebraska provides you a paycheck, that is one of the biggest problems.
9. I know these services and others are there but could not comment on exactly how each operates.
10. There are a lot of questions that seem to go unanswered around the Medicaid funding issues - or depending upon who you ask you get a different answer.
11. It would be nice to have a handout or link with a directory by service.